County: Jefferson Facility ID: 1600 Page 1

BETHESDA DI ERKER/OLSON 700 HOFFMANN DRI VE

WATERTOWN Phone: (920) 261-3050 Ownershi p: Non-Profit Church Related 53094 Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: **FDDs** Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 260 Title 18 (Medicare) Certified? No Total Licensed Bed Capacity (12/31/00): 263 Average Daily Census: 244 Number of Residents on 12/31/00: 247

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3)	1/00)	Length of Stay (12/31/00)	%
Home Health Care	No	Primary Diagnosis	 %	Age Groups	%	Less Than 1 Year	6. 9
Supp. Home Care-Personal Care	No					1 - 4 Years	7. 3
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	80. 6	More Than 4 Years	85. 8
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	8. 9		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	7. 3		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	3. 2	****************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & 0ver	0.0	Full-Time Equivalen	t
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	0.0	65 & 0ver	19. 4		
Transportation	No	Cerebrovascul ar	0.0			RNs	7.8
Referral Service	No	Di abetes	0.0	Sex	%	LPNs	5.8
Other Services	Yes	Respi ratory	0.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	0.0	Male	49. 0	Aides & Orderlies	72. 4
Mentally Ill	No			Female	51.0		
Provide Day Programming for			100.0				
Developmentally Disabled	Yes				100. 0		

Method of Reimbursement

		Medi c	are		Medi c	ai d											
		(Title	18)		(Title	19)		0th	er	P	ri vate	Pay	1	Manage	d Care		Percent
			Per Di	em		Per Die	m		Per Die	m		Per Dien	n]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	. %	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
	-			-			-			_			_				
Skilled Care	0	0.0	\$0. 00	0	0.0	\$0. 00	0	0. 0	\$0. 00	0	0. 0	\$0. 00	0	0. 0	\$0. 00	0	0.0%
Intermediate				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Dev. Di sabl ed				246	100. 0	\$159.37	0	0.0	\$0.00	1	100. 0	\$210.50	0	0.0	\$0.00	247	100.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		246	100. 0		0	0.0		1	100.0		0	0.0		247	100.0%

Page 2

BETHESDA DI ERKER/OLSON

	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00									
	I			U		Total				
	Activities of	%	As	sistance of	% Totally	Number of				
70.8	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents				
0.0	Bathi ng	5. 3		46. 6	48. 2	247				
2. 1	Dressi ng	17. 4		49. 4	33. 2	247				
2. 1	Transferri ng	38. 1		42. 1	19. 8	247				
6. 3	Toilet Use	22. 3		55. 5	22. 3	247				
0.0	Eati ng	44. 9		40. 5	14. 6	247				
18. 8	*************	********	*****	*********	*********	********				
48	Continence		%	Special Trea	tments	%				
	Indwelling Or Extern	al Catheter	0.4	Recei vi ng	Respi ratory Care	0. 4				
60. 4	0cc/Freq. Incontinen	t of Bladder	78. 1	Recei vi ng	Tracheostomy Care	0. 0				
0.0	0cc/Freq. Incontinen	t of Bowel	78. 1	Recei vi ng	Sucti oni ng	0. 8				
0.0	1			Recei vi ng	Ostomy Care	1. 2				
0.0	Mobility			Recei vi ng	Tube Feedi ng	4. 9				
0.0	Physically Restraine	d	1. 2	Recei vi ng	Mechanically Altered Diets	68. 8				
0. 0	İ									
16. 7	Skin Care			Other Reside	nt Characteristics					
22. 9	With Pressure Sores		0.8	Have Advan	ce Directives	2. 8				
	With Rashes		13. 4	Medi cati ons						
	70. 8 0. 0 2. 1 2. 1 6. 3 0. 0 18. 8 48 60. 4 0. 0 0. 0 0. 0 0. 0 0. 0 16. 7	Activities of 70.8 Daily Living (ADL) 0.0 Bathing 2.1 Dressing 2.1 Transferring 6.3 Toilet Use 0.0 Eating 18.8 ***********************************	Activities of	Activities of % As 70.8 Daily Living (ADL) Independent One 0.0 Bathing 5.3 2.1 Dressing 17.4 2.1 Transferring 38.1 6.3 Toilet Use 22.3 0.0 Eating 44.9 18.8 **********************************	Activities of	Activities of				

	Thi s]	FDD		A11	
	Facility	Fac	cilities	Fac	ilties	
	%	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	92. 8	85. 5	1. 09	84. 5	1. 10	
Current Residents from In-County	4. 5	42. 1	0. 11	77. 5	0. 06	
Admissions from In-County, Still Residing	4. 2	19. 5	0. 21	21. 5	0. 19	
Admissions/Average Daily Census	19. 7	16. 4	1. 20	124. 3	0. 16	
Discharges/Average Daily Census	19. 7	19. 2	1. 02	126. 1	0. 16	
Discharges To Private Residence/Average Daily Census	11. 9	9. 2	1. 29	49. 9	0. 24	
Residents Receiving Skilled Care	0. 0	0. 0	0. 00	83. 3	0.00	
Residents Aged 65 and Older	19. 4	16. 2	1. 20	87. 7	0. 22	
Title 19 (Medicaid) Funded Residents	99. 6	99. 5	1. 00	69. 0	1. 44	
Private Pay Funded Residents	0. 4	0. 5	0. 80	22. 6	0. 02	
Developmentally Disabled Residents	100. 0	99. 3	1. 01	7. 6	13. 09	
Mentally Ill Residents	0. 0	0. 5	0. 00	33. 3	0. 00	
General Medical Service Residents	0. 0	0. 2	0. 00	18. 4	0. 00	
Impaired ADL (Mean)*	51. 1	50. 8	1. 01	49. 4	1. 03	
Psychological Problems	20. 2	45. 9	0. 44	50. 1	0. 40	
Nursing Care Required (Mean)*	11. 3	11. 0	1. 03	7. 2	1. 58	